



March 20, 2013

Written testimony of Karen Chadderton, RN, Administrator of Riverside Health & Rehabilitation Center, Concerning S.B. No. 1064 (RAISED) AN ACT CONCERNING THE ADMINISTRATION OF MEDICATION IN NURSING HOMES BY CERTAIN NURSE'S AIDES

Good afternoon Senator Gerratana, Representative Johnson and to the members of the Public Health Committee. My name is Karen Chadderton. I have been a licensed register nurse since 1973 and also hold the position of Administrator, at Riverside Health & Rehabilitation Center in East Hartford, Connecticut. Riverside is a longstanding provider of nursing care in the communities of greater Hartford. It is 345 bed facility providing services in short term rehabilitation, and long term skilled care. Riverside is also the recipient of the Silver Quality of Care Award from the American Healthcare Association. I am here this afternoon to ask the Human Services Committee to support S.B. No. 1064 (RAISED) AN ACT CONCERNING THE ADMINISTRATION OF MEDICATION IN NURSING HOMES BY CERTAIN NURSE'S AIDES

This legislation authorizes Connecticut skilled nursing facilities and rehabilitation centers to employ Certified Nurses Aides (CNAs) with additional training and experience, as prescribed by the Department of Public Health, to administer medication to nursing home residents. This proposed authority is similar to the authority provided to homemaker home-health aides in the 2012 session of the Connecticut General Assembly. The specific certification requirements, including training and experience requirements, will be set forth in regulations promulgated by the Department of Public Health according to the bill as drafted. Authorizing CNAs to administer medications, except those administered by injection, in the closely supervised nursing home environment is a cost-effective approach to the safe administration of medicines. Under SB 1064, a prescribing practitioner will have the clear authority to specify that a medication shall only be administered by a licensed nurse.

Adoption of SB 1064 will improve the quality of care Connecticut nursing home residents receive.

The addition of a C.N.A. who would be trained to administer medications would enhance and increase the flexibility of staffing as an option to optimize the capacity of each staffing level and would not be intended to replace a nurse. Currently, skilled nursing facility utilizes LPNs primarily to administer medications. This is a very technical and time consuming task and allows little time in the course of their day to do much more. The addition of this position would allow the LPN, together with the RN, increased ability to coordinate the care and the oversight of the implementation of the

plan of care for each resident. In addition, it would allow the nurse increased presence as a supervisor over the functioning of the team on their unit to enhance the quality of care.

Some have expressed concern that the nurse has to assess the resident during med pass and this would be lost with the use of a specially trained C.N.A. This is an inaccurate observation as it is only a RN who can assess while an LPN can gather the information required to assist in the assessment. By utilizing this position, the LPN would have more time to do this and to be responsive to the needs of the patients under his/her care.

Thank you again for this opportunity to testify and I would be happy to answer any questions you may have.